#### PSYCHOLOGICAL EVALUATION

NAME: Beata Kowalski DATE OF BIRTH: 02/24/1973

MARITAL STATUS: Married DATE OF REPORT: 12/05/2016

SEX: Female

**CONTACT DATES:** 10/21, 10/31, and 11/21/2016

### **REASON FOR EVALUATION:**

Beata was referred for evaluation by her attorney, Debra Salisbury, Esq., for purposes of determining her current psychological functioning. Beata's daughter, Maya Kowalski, was sheltered on October 14, 2016 due to concerns that Beata and her husband, Jack Kowalski, are "interfering with allowing the child to be properly diagnosed and have full records to review and treat the child." The Department of Children and Families (DCF) stated that Beata was "aggressively and inappropriately medically treating Maya for a disorder which medical physicians do not believe the child to have. The child is said to be diagnosed with Complex Regional Pain Syndrome[,] as well as Reflex Sympathetic Dystrophy." Beata agreed to her psychological functioning being assessed. She hopes to be reunited with her daughter. Presently, she is only permitted supervised phone and written contact with Maya.

#### SOURCES OF INFORMATION AND MEASURES ADMINISTERED:

#### **Documents and Records:**

The following documents were provided by Debra Salisbury, Esq. counsel for Beata Kowalski.

Medical Evaluation – Preliminary Report on Maya Kowalski completed by Sally Smith, M.D. (dated October 13, 2016)

Unsigned Letter from Very Rev. John Costello to Judge Dess (dated November 6, 2016)

Document Titled "2A" (undated)

Medical Records for Maya Kowalski from John Wassenaar, M.D.

Medical Records for Kyle Kowalski from John Wassenaar, M.D.

Medical Records for Maya Kowalski from Anthony Kirkpatrick, M.D.

Letter from Rebecca Johnson, M.S. and Lauren Mauck, M.A., LMHC to To Whom It May Concern (dated December 12, 2015)

Letter from Rebecca Johnson, M.S. and Lauren Mauck, M.A., LMHC to To Whom It May Concern (dated October 21, 2016)

Physical Therapy Progress Note for Maya Kowalski from Agility Physical Therapy & Sports Performance, L.L.C. (dated August 16, 2016)

Medical Records on Maya Kowalski from Tampa General Hospital (dated July 30 to August 27, 2015)

Dependency Shelter Order for Maya Kowalski Executed October 14, 2016

Neuropsychological Evaluation on Maya Kowalski (dated October 20, 2016)

Maya's Letter (undated)

Dental Records on Kyle Kowalski from Tiffany Square Dental (dated March 5 and 10, 2016; July 6, and 21, 2016; August 23, 2016; September 13, and 29, 2016)

Dental Records on Maya Kowalski from Tiffany Square Dental (dated March 5, 2016; April 9, 12, 18, and 29, 2016; May 4, 2016)

Progress Notes for Maya Kowalski for December 10, 2015 Office Visit with Elvin Mendez, M.D.

Psychiatry Consult Note dated October 15, 2016 for Maya Kowalski Electronically Signed by Mark Cavitt, M.D.

Consult Records for Maya Kowalski from Lurie Childrens (dated July 21, 22 and 23, 2016)

Medical Records on Maya Kowalski from Florida Child Neurology Electronically Signed by Carl Barr, D.O. on February 21, 2016

Letter from Sister Frances Lalor to Madam Salisbury (dated November 7, 2016)

Letter from Jacqueline Detert to To Whom It May Concern (dated November 3, 2016)

Letter from Diana Shepler to To Whom It May Concern (dated November 7, 2016)

Case Progress Notes for Kyle Kowalski, Abuse Report Number: 2016-281919 (Printed November 21, 2016)

Digital Audio Transcript Regarding Maya Kowalski, Case Number: 2016 DP 601 NC, Honorable Lee Haworth, Hearing Date November 8, 2016

Document Titled "Client History" for Kyle Kowalski

Child Protection Center, Inc., Final Case Summary Report for Kyle Kowalski (date report sent November 16, 2016)

John Hopkins All Children's Hospital Records on Maya Kowalski October 7, 2016 – November 10, 2016

Order on Shelter Review as to Visit by Father, Siblings, and Others

Letter from Jared Monaham, Esq. to Varinia Van Ness, Esq. (dated December 1, 2016)

The following records were provided via CD by the Department of Children and Families (DCF):<sup>1</sup>

13683384 771345473005257 891040816\_n

14523825 1613304085637017 4291518467326083072\_n

Anesthesia Consent 10.6.15

Anesthesia Consent 10.7.15

Anesthesia Consent 10.8.15

Anesthesia Consent 10.9.15

BK 101480775 shelter packet Redacted

Chrono Notes Redacted

CM23 Imaging

Credit Card Receipts

Email to Beata Kowalski 11.5.15 Redacted

Email to Tiffany Hanson

file cabinet 1

file cabinet 2

<sup>&</sup>lt;sup>1</sup> Records are listed by their electronic file name.

file cabinet 3

Golisano Children Hospital 10.28.15

Instagram E-Mail with Link (Posted Around October 6th)

Instragram E-Mail with Link

Intake Report 163795836.0

Intake Report 163795877.0 Redacted

Investigative Summary 163795897.0

JHACH Med Records 1 – Redacted

JHACH Med Records 2 Redacted

JHACH Med Records 3 Redacted

JHACH Med Records 4 Redacted

Kirkpatrick - Consultation Report 9.23.15

Kirkpatrick - Cover Sheet 11.10.15

Kirkpatrick - Daily Report 1.4.16 Redacted

Kirkpatrick - HIPPA Acknowledge

Kirkpatrick - Lab, Radiology, Office Notes Redacted

Kirkpatrick - Med Record 1.5.16\_Redacted

Kirkpatrick - Med Record 2.10.16 Redacted

Kirkpatrick - Med Record 4.13.16\_Redacted

Kirkpatrick - Med Record 12.7.15 Redacted

Kirkpatrick - Med Records 2.10.16 (2) Redacted

Kirkpatrick - Progress Notes 9.23.15

Kirkpatrick - Progress Notes 10.12.15

Kirkpatrick - Progress Notes cover sheet

Kirkpatrick - Scripts 11.2.15 Redacted

Kirkpatrick - Visit Notes

kowalski ems report-001

Quest Diag - Lab Report 12.15.15 Redacted

Screenshots

SMH Records Mother

VRBH - Instant Report 10.30.15 Redacted

Youtube Video 1

Youtube Video 2

Youtube Video 3

Youtube Video 4

Youtube Video 5

Youtube Video 6

The following documents were provided by Beata Kowalski

Document Titled "Timeline 2"

Audio Recording of Supervised Phone Call Between Maya and Beata on November 15, 2016 Motion to Limit Mother's Phone Contact and Father's Visitation with Child Motion for Continuance

The following documents were provided by Jack Kowalski:

Document Titled "2A" (undated)
Photo of Maya Kowalski at Tampa's Lowry Park Zoo
"My Special Care Journal" Completed by Maya Kowalski
Letter from Diana Shepler dated November 7, 2016 written to To Whom It May Concern
Unsigned Letter from Very Rev. John Costello to Judge Dess (dated November 6, 2016)
Document Regarding Concerns of What Maya Brings Up During Visits

Records were provided by Eagle Wings Counseling Center for Beata and Kyle Kowalski

Records were provided by John Wassenaar, M.D. on Beata, Maya, and Kyle Kowalksi

No documents were provided by Michael Kelly, Esq., counsel for Maya and Kyle Kowalski. This evaluator requested Mr. Kelly provide records he would like to be reviewed as part of this psychological evaluation.

No documents were provided by Sally Smith, M.D. This evaluator requested that Dr. Smith provide information that she would like to be considered as part of this psychological evaluation.

#### **Assessments:**

Clinical Interview of Beata Kowalski
Psychosocial History of Beata Kowalski
Mental Status Examination of Beata Kowalski
Minnesota Multiphasic Personality Inventory – II: Restructured Form (MMPI-2-RF)
Personality Assessment Inventory (PAI)
Parenting Stress Index – IV (PSI-IV)

### **Collateral Contacts:**

Interview with Jack Kowalski Interview with Kyle Kowalski Telephone Interview with Sandy Ryan Telephone Interview with Carol Tapp Written Interview with Sarah Stevens Written Interview with Jessica Stevens

#### SOCIAL AND FAMILY HISTORY:

Beata grew up in Jastkowice, Poland. The family moved to the United States in 1990. She is one of four children born to Josef and Czeslawa Zurawski. She indicated she was raised by her mother and grandmother. Beata described her father as verbally and physically abusive. She stated she does not remember what her parent's relationship was like prior to their separation when she was in third grade. Beata's parents eventually divorced when she was 17-years-old. Moreover, she stated she is unaware of her father's current location, age, or history of emotional

issues. She relayed his primary method of discipline was "hitting with a belt." Furthermore, she stated she "thinks" her father abused her but "it was a long time ago – [I] can't remember details."

Beata described her mother as "hard working, caring, supportive, [and] always helping her kids." She reported her mother is a retired library manager and currently resides in Chicago, Illinois. Beata conveyed her mother's primary method of discipline was "Time out, or taking things away." Beata denied any history of parental substance abuse or legal or emotional problems. She relayed she has one brother and two sisters. When asked to rate her relationship with her siblings utilizing a five-point Likert scale with one being "not close at all" and five being "extremely close," she rated her relationship with her brother as a three. She relayed that she sees her brother three or four times a year. When asked to rate her relationship with her sisters, she rated her relationship with one sister as a "three or four" and the other sister as a four. She relayed that she sees both sisters approximately three times a year. All of her siblings currently reside in Chicago. When asked if there was anything about her parents or family she would change, she replied, "have my mom get rid of my 'father' the day I was born."

This examiner inquired about significant events that have occurred during Beata's life, including losses, moves, injuries, honors, championships, etc. She conveyed that between her birth and the age of five "the family moved into a new home when she was three" and "she lived on a farm and help[ed] at home with dishes." Between the ages of six and ten, Beata reported she was an "A student with high honors." She indicated she continued to "work in the field/farm to help her parents" and her mom left for the United States when she was seven-years-old. Additionally, she stated her Grandma was her caregiver when her mother was in the United States. When she was nine-years-old, her father left for the United States. Between the ages of 11 and 15, she relayed she was an "A student" and continued to "help mom around the house." Beata stated that between the ages of 16 and 20 she left Poland for the United States and lived with her mother and sisters. She also graduated high school and started college. She indicated that between the ages of 21 and 30 she lived on her own and with a boyfriend. She also graduated from college with her Bachelor's degree in nursing. Beata conveyed she got married at 22-years-old and got divorced at 27-years-old. Beata stated that since the age of 31 she has been married to her current husband, Jack Kowalski, and had her children, Maya and Kyle. Additionally, she said Kyle was born very ill and "almost died."

## CLINICAL PRESENTATION AND BEHAVIORAL OBSERVATIONS:

Beata arrived on time for her scheduled appointments. She presented as a casually but appropriately dressed woman. Her grooming and hygiene were appropriate. She was cooperative with the evaluation process and generally had a pleasant demeanor. However, several times throughout the evaluation she displayed an agitated mood when discussing Maya's being sheltered and the allegations that had been made against her and Jack, her husband. Mood seemed generally positive. Affect seemed appropriate in range and expression. Her thoughts were clearly and coherently presented. There was no evidence of a formal thought disorder or that she was experiencing any perceptual disturbances. Overall, she did not appear to suffer from any major disturbance in mood, cognition, or behavior.

#### **GENERAL INFORMATION:**

Beata is a 43-year-old woman. She reported that she is married and has two children with Jack Kowalski. She noted her daughter, Maya, is 10-years-old and son, Kyle, is 9-years-old. She stated she married Jack in 2004. As indicated earlier in this report, Beata was previously married in 1995. She indicated the reason her first marriage ended was her ex-husband did not want children. She said the reason she was attracted to Jack was his outgoing personality, honesty, and kindness. Additionally, she married him because of his "honesty and true love to her." Beata indicated she is happily married and Jack has a good relationship with their children. Furthermore, she said "They love their dad! He's their idol."

Upon interview, Beata said she currently resides at 19886 Cobblestone Circle, in Venice Florida. The home is 2600 square feet and has 3 bedrooms. She listed the advantages of the residence as it is a "nice neighborhood, nice people, and great friends." The family has lived in the home for 2 years and it is a 10 to 15 minute drive to the children's school. She was unable to identify any disadvantages of this residence.

Beata described her religious affiliation as Catholic. She conveyed that she was raised Roman Catholic and attends services regularly. She described her current interests as scuba diving, reading or listening to books, and going to the beach. Beata described her social network that she can rely on for support are her family, "very supportive, giving, helping" and her neighbors "very supportive."

### **PSYCHIATRIC HISTORY:**

Beata described her current mental and emotional health as "very good." Beata said that she is not currently taking any medication for emotional problems or difficulties. Furthermore, Beata denied previously taking or being prescribed medication for emotional problems or being hospitalized because of emotional problems or difficulties. She conveyed that she has never been diagnosed with a mental disorder. Beata also conveyed that she has no history of self-injurious behavior, homicidal ideation, suicidal ideation, suicide attempts, or sexual abuse. Beata was asked to identify current stressors in her life. She noted her daughter's illness (CRPS) and losing custody of her daughter. Additionally, Beata stated she and Jack attended marriage counseling in 2016 "during Maya's illness."

### **MEDICAL HISTORY:**

Beata reported her physician is John Wassenaar, M.D., in Osprey Florida. She listed her current medical problems are hypothyroidism, gastritis, and chronic sinus infections. Her medical history is noteworthy for "sinus surgery, wisdom teeth removal, and multiple gyno surgeries." Beata said she is currently prescribed levothyroxine 50mcg daily, omeprazole 20mg daily, citalopram 40mg daily, melatonin 5mg every night, zolpidem 5mg as needed for insomnia, alprazolam 0.25 mg twice daily as needed, Flonase 1 spray per day, D3 5000 units daily, adult vitamins daily, and aspirin 81 mg daily.

### DRUG AND ALCOHOL HISTORY:

Beata, upon interview, denied any history of substance abuse. Beata reported that she does consume alcoholic beverages. However, she denied becoming intoxicated during the past five years. Additionally, she denied ever experiencing a black out from consuming alcohol or anyone expressing concern about her alcohol consumption. She stated she consumes one glass of wine per day.

## LEGAL AND CRIMINAL HISTORY:

Beata denied ever being arrested. She said that she has never been charged with nor convicted of a crime. Additionally, she denied ever having her license suspended or revoked.

### SCHOOL AND EMPLOYMENT HISTORY:

Beata reported that she graduated from high school prior to attending college. She did not receive any tutoring, counseling, or special education assistance during high school. Beata conveyed that she attended Moraine Valley Community College and received her Associate's Degree in nursing. She also attended Lewis University and received her Bachelors of Science Degree in nursing (BSN). Beata earned her Certified Registered Nurse Infusion after completing her BSN.

Currently, Beata is employed by CVS Specialty Infusion as a Primary Case Nurse Manager. She reported she works an average of 36 hours per week. She has been employed with CVS since 2009. She previously worked for Oak Brook Surgical Center as a registered nurse (RN) in the recovery room. Beata noted that she left because she desired a more flexible schedule to spend time with her children. Also, she previously worked at Loyola University Medical Center (LUMC) as a RN. Her reasons for leaving were "trying to spend more time with my kids/family, didn't want to do o/c anymore." Additionally, she was previously employed with Hinsdale Hospital as a RN. She added her reason for leaving was her "old boss called me and asked me to work for him at LUMC; got a 'good' offer."

#### **COLLATERAL INFORMATION:**

#### Interview with Jack Kowalski

Jack denied having significant concerns regarding his wife's mental health. He said that he is unaware of any times in which Beata's mental health has adversely impacted her daily functioning in any setting, including work and home. He said it was his understanding that while with her mother, Maya had only received medical care that her physicians prescribed.

### Interview with Maya Kowalski

Maya was interviewed at All Children's Hospital. Maya described a positive relationship with her parents and her brother. She denied concerns regarding her parents' mental health. However, she said that she does worry about her brother, as she knows he cries about her health. She said that her parents have her brother seeing a therapist. She did not express concerns regarding her

parents' relationship. She said that while they argue on occasion, they do not yell. Maya said that she first began experiencing pain in July of 2015. She said that she told her parents about the pain, and they have done their best to get her treatment. Despite seeing many doctors, she said she continues to suffer from intense pain throughout her body. She said that the pain is constant and that few people understand her medical condition. She said she cannot walk or perform many daily tasks due to the pain. She did not express any concerns regarding her mother or the care her mother has provided her.

## Interview with Kyle Kowalski

Kyle expressed no concerns regarding his mother. He described a positive relationship with her. Moreover, he conveyed that his father and sister also have a positive relationship with his mother.

## Telephone Interview with Sandy Ryan (Neighbor and Friend of Beata Kowalski)

Upon interview, Sandy Ryan relayed she met Beata Kowalski shortly after moving to Florida in the neighborhood. She denied any concerns of alcohol or substance abuse with Beata. Ms. Ryan reported that she has had opportunities to observe Beata interacting with her children. She denied any concerns regarding Beata's parenting. Ms. Ryan stated all interactions seemed appropriate and Beata appeared to be a "super attentive mother." Additionally, Ms. Ryan said she had no concerns regarding Beata's mental health. She concluded the interview by relaying that she could not imagine the stress the Kowalskis are under and hopes the situation is corrected as soon as possible.

# Telephone Interview with Carol Tapp (Client and Friend of Beata Kowalski)

Upon interview, Carol Tapp stated she was a retired nurse. She relayed that she would like to comment on Beata's professional skills as a nurse, as well as her parenting abilities. She conveyed she first met Beata when she moved to Florida over two years ago. She stated she was one of Beata's first clients. Ms. Tapp denied any concerns regarding Beata's abusing alcohol or drugs. She conveyed that she has been to the Kowalski's home and had the opportunity to observe Beata with her children. She relayed the children always appear happy, are well behaved, and were loving to both parents. Additionally, she stated Beata redirected the children when needed but did so by talking to them in a very calm manner. Ms. Tapp said the children are always dressed nicely and respectful to adults. She added that Mr. Kowalski is also very nice and he volunteered to help her setup her iPad when she first purchased it. Ms. Tapp denied any concerns with Beata's mental health. Furthermore, she said Beata's ability to handle chronic stress and Maya's sickness is "unbelievable." Moreover, she said "Beata is determined to figure out what is going on with Maya. [She] didn't want to stop until she could figure it out and help her child." Ms. Tapp also added that the Kowlaskis are attentive to their son, Kyle, despite Maya's sickness. She stated she has overheard Beata on the phone with Maya's doctors and noted she is always respectful. When it comes to her nursing skills, Ms. Tapp indicated Beata is dedicated and concerned for her patients and does not cut corners. She noted that Beata still came to care for her after receiving information that she was unable to see Maya. "She spent a lot of time with [me]."

## Written Interview with Sarah Stevens (Friend of Beata Kowalski)

Sarah Stevens relayed that she has three daughters (ages 28, 25, and 20). She said that she has known Beata for a little over a year and that she first personally met Beata when Beata and Maya arrived in Monterrey, Mexico for ketamine coma treatment. Ms. Stevens said that while she resides in Naples, Florida, she was currently in Monterrey, Mexico for medical treatment with her oldest daughter, Jessica, who suffers with Reflex Sympathetic Dystrophy (RSD)/CRPS. She expressed no concerns regarding Beata's use of alcohol or drugs. She said that while she has never met Kyle in person she has had an opportunity to meet Maya in person while she and Beata were in Mexico. She described Beata as a caring and loving mother who was trying desperately to get her daughter better.

She said she had observed Maya in severe pain and conveyed her legs were dystonic and she had a few lesions. She said that Beata and Maya were both naturally apprehensive but also hopeful that the ketamine coma would help put Maya in a better state with the pain of RSD/CRPS. She relayed that most of the interactions that she observed between Maya and Beata were when she visited Beata on the days during the coma, as she wanted to try and help in any way she could to be supportive of her during this trying time. She said that her own daughter had undergone the ketamine coma protocol and that it is not an easy thing to see your daughter in a coma. Moreover, she said that while Beata had the experience of the intensive care unit (ICU), nothing prepares you for seeing your own daughter in a coma. She said during those days she saw Beata as a loving mother. She would brush Maya's hair, apply chapstick to her lips, and sing and talk with her. She was always by her side. Ms. Stevens added that no mother wants to put her child in a coma but that sometimes it is necessary to try something to rid them of the intense burning pain associated with this terrible disease. She said that she has never observed Beata become upset with Maya and that she has no concerns regarding her parenting.

She concluded her written interview by writing, "As a mother of a daughter who is suffering with this disease [,] I find it necessary to say that no mother wants to see their child suffer and endure the pain that these patients with RSD/CRPS feel. These patients feel like they are being burned alive. No mother or father or family should have to experience this with their loved one. In the case of my daughter Jessica, the ketamine coma procedure/protocol was our last hope. If it wasn't for Dr. Kirkpatrick in Tampa, [Florida] and his expertise in this largely misunderstood neurological disorder my daughter would not be alive today. As per his recommendation[,] I had to air ambulance my daughter to Monterrey, Mexico[,] as the doctors in the US had no other options. And, if it wasn't for Dr. Cantu and his staff here in Monterrey, she would not be alive today. I thank these doctors and God everyday for the life of Jessica. That was seven years ago[,] and she is still with us fighting every day, as there is no cure for the disease. I also would like to say that no American family should have to exhaust all their financial resources for this treatment. I was sent to Mexico by a US doctor[,] as it was our last hope. None of it was covered under our insurance[,] as it was deemed experimental. That shouldn't happen. As parents we only want the best for our children and although at the time it may have seemed crazy to travel to a foreign country and put your daughter in a coma, for Jessica and for our family it proved to be a lifesaver. What I observed in Beata was a fierce determination as a mother to get her 10 yr old daughter better and out of the pain she was experiencing with RSD/CRPS. I feel that any other parent faced with this difficult decision would probably make the same choice. In my observations during these past years with my daughter with this illness, I have met many patients. While for some patients this disease can be brought on and re-triggered by objective things such as infection, injury, trauma, etc.; for others it can be something as minor as a splinter that can cause an exacerbation of the disease. I am saddened to hear what this family is going through and I sincerely hope that the findings will be proven unfounded."

## Written Interview with Jessica Stevens (Friend of Beata Kowalski)

Jessica Stevens provided the following information for this examiner to consider in response to the questions I provided her:

"My name is Jessica Stevens, I am 28 years old. I am not married, I am the daughter of my parents Sarah and David Stevens, older sister of Katherine (25) and Michelle (20). I am from Naples Florida, but I currently live in Monterrey Mexico where I am receiving treatment for my condition, RSD/CRPS. This is the same condition that Beata's daughter, Maya has.

I have completed high school and 2 years of college courses, however, have not been able to finish my degree due to illness.

When I was 17 I became critically ill after a tick bite on the back of my leg changed my life. In 2009 doctors in the U.S told my parents that I had only a few weeks left to live. At that time I was paralyzed, confined to a hospital bed, being fed through a feeding tube, covered in ulcerating skin lesions, suffering daily seizures and agonizing burning pain due to my severe case of RSD/CRPS. As a last resort, we were told there was a research study, where doctors were using extremely high doses of the anesthetic drug ketamine to medically induce a coma, for 5-7 days, allowing the nervous system to shut down and restart, similar to rebooting a malfunctioning computer. Because of the extremely high doses of ketamine necessary, this intervention is currently not performed in the U.S. This protocol has been done in Germany and Mexico with very promising results for severe cases of RSD/CRPS that are not responding to other treatments.

It is risky and dangerous, but for many, including myself, the results have been life-changing/saving and miraculous. I was patient #23 to undergo the ketamine coma in Mexico and afterwards I had 3 years of remission from my RSD symptoms, returning to school, physical therapy, and to my life. Unfortunately, a surgery and sepsis infection led to a relapse, which is why my mom and I are currently living in Monterrey as I fight to regain my health and function once again.

Reflex Sympathetic Dystrophy(RSD)/Complex Regional Pain Syndrome(CRPS) is a rare and poorly understood neurologic disorder that usually is triggered by an illness or injury- after which, the nervous system malfunctions and continues to send constant pain signals to the brain. This pain is difficult to manage and often does not respond to treatment. It generally worsens over time and can spread to all areas of the body.

It is considered the most painful disease known to medical science. On the McGill pain scale, used in most major medical centers to rank pain intensity, RSD/CRPS is ranked as a 46/50-- to

put that in perspective, that is higher than pain from a bone fracture (20), cancer (24), childbirth (32) and even above amputation pain without anesthesia (38).

The type of pain RSD/CRPS induces makes you feel as if you are being burned alive. Like the blood in your veins has been replaced by lighter fluid or acid. A simple touch, hug, or gentle movement feels like a blowtorch is against your skin. A slight breeze feels like you are being stung by fire ants and cut with a knife. It is a pain so severe that you can't envision living another minute with it. It is a pain so bad you would consider putting yourself, or your child, into a medically induced coma to find relief.

It is a pain that I have a hard time explaining and coping with at 28 years old, I cannot even begin to imagine how I would handle it at 10.

Maya Kowalski is the strongest kid I know.

I first came to know of the Kowalski family in August 2015. My father suffers from crohn's disease and requires intravenous nutrition and other infusions to keep him alive. Beata was assigned to his case as his infusion nurse. One day my father overheard Beata on the phone talking about her ill daughter who was in the hospital at the time. When she hung up, he asked her about it, and she explained how her once healthy 9 year old daughter had deterioriated over the past several months, after suffering from life threatening asthma attacks, to the point that she was now unable to sit up or walk. Worse than that, she was in constant agonizing pain that was hard to control and getting worse as time progressed instead of better.

Listening to her, my father sympathized, having gone through a similar struggle with me, and suggested she consult with Dr. Anthony Kirkpatrick in Tampa, as he has over 30 years of experience in treating difficult pain cases and had been instrumental in orchestrating my care and treatment several years earlier.

Maya was ultimately seen by Dr. Kirkpatrick and diagnosed with RSD/CRPS. She was scheduled to receive a round of ketamine infusions at his treatment center.

I 'met' Beata and little Maya via facetime video calls around this time and talked with her about the process of getting these infusions, what she would feel and experience, etc.

We continued to stay in touch with Beata and Maya via facetime and text message and stayed up to date on her progress.

Thankfully, Maya's symptoms and pain responded temporarily to those first ketamine infusions, which was encouraging, but it was not long lasting and she continued to suffer and worsen.

At that time, it was suggested that Maya could benefit from a ketamine induced coma, as I and other severe RSD/CRPS patients have in the past.

In November 2015 Maya and Beata traveled down to Monterrey to be evaluated by Dr. Fernando Cantu, my physician, and the lead director of the ketamine coma study for cases of intractable RSD/CRPS.

And that was the first time we were physically able to meet face to face.

Beata and Maya came over to visit my mom and I at our apartment here and we had an instant bond and connection with each other.

When I met Maya she was in a very weakened condition and suffering from severe pain.

She had several ulcerating skin lesions on her arm and leg and her legs were twisted inward into a fixed dystonia posture. Though uncomfortable, she was able to sit up in her wheelchair while we talked, but cried in pain whenever she needed to be moved, touched or transferred. It broke my heart to see this beautiful little girl dealing with this illness.

During our meeting that day Maya told me all about her schooling, which she had managed to keep up with via a home tutor, and excel at, despite her constant pain, which I was so impressed by. She told me all about her little brother Kyle, her love of Manatee's, collecting and trading shopkins toys and showed me pictures of her adorable baby nephew. Even in terrible pain, she remained positive and her sweet bright spirit was able to shine through. She is truly a special girl.

I shared with her some of my own story and answered any questions she had about the ketamine coma she was about to undergo, and then we spent the rest of the afternoon coloring pictures to hang in our rooms. Besides the fact that we were both hooked up to infusion pumps, and in pain, it was a totally abnormally normal day. It was a blessing to have Beata and Maya enter our lives and to feel that in some small way, we could help them endure the journey ahead, since my mom and I have walked this path before.

To ask what I observed in regards to Beata's parenting during that time and if the interactions I observed were appropriate, I can only say what I saw was an exceptional mother and wonderful advocate, who for the past several months had fully devoted herself to caring for her ill daughter, trying to find answers to relieve her pain and get her back to a more functional life. Her experience and training as an ICU nurse has only added to her compassion, motivation and ability to help her daughter endure this difficult battle.

I saw a lot of my own mother's tenacity, strength, confidence, persistence, patience and unconditional, unwavering love for her child in Beata.

Qualities that I would surely be dead without. My mother never gave up on me throughout my illness, continuing to fight for answers and search for alternatives, and it was clear to me that Beata's devotion to her daughter was the same.

The next time I saw Beata and Maya was in the hospital here in Monterrey after she underwent the ketamine coma procedure.

The transformation was remarkable, her pain was significantly less, her function and stamina were improved, she had her appetite back. The sores on her arm had healed and she was animated, lively and full of jokes and laughter and happiness to be feeling relieved of her constant pain. It was beautiful to see.

The next week Beata and Maya returned home to Florida, but we have kept in frequent contact throughout the past year.

Maya has continued to deal with ups and downs with her pain and has gone through ketamine booster infusions in Florida, which are vital to maintaining the progress of the ketamine coma.

Needless to say, her incredible mother and father have continued to go above and beyond to provide her with whatever treatments she has needed to enable her to continue her recovery.

The thing that's hard to explain to anyone who hasn't lived this nightmare is how having a child diagnosed with a complex, serious, life-altering illness is a completely game changing experience. Everything you ever thought was true is no longer. The life you envisioned, things you thought were possible for you and your child's life becomes totally rewritten. Everything looks completely different.

You have to learn to be braver than you ever thought you could be. You have to dig deep and find your inner faith and strength many times over. You must face lessons of loss and catastrophic circumstances beyond your control.

It's an incredibly trying experience to go through. No one can prepare you for it. No two people approach it or respond to it in the same way.

The Kowalski's have handled this with strength, faith, grace and love.

Beata Kowalski is an incredible woman, mother, nurse and friend who I would never for a moment believe could harm anyone, let alone her own child who she loves more than life. I have no concerns regarding her parenting, judgement, discipline of her children, abuse/use of alcohol or drugs. I have no concerns about her ability to take care of her daughter. I believe Maya needs to be back with her family as soon as possible. I believe her life depends on it. I hope and pray her condition will not worsen during this ordeal. And that she will be able to move forward with her recovery in her loving home with her mother, father and brother as soon as possible. She deserves that. They all do.

Thanks so much for your time and consideration in helping this wonderful family in this matter. May God bless you for your time and compassion."

### PSYCHOLOGICAL TEST RESULTS:2

## Minnesota Multiphasic Personality Inventory – II: Restructured Form (MMPI-2-RF)

As part of this evaluation, Beata was asked to complete the Minnesota Multiphasic Personality Inventory – 2: Restructured Format (MMPI-2-RF). The MMPI-2-RF is a self-report measure which provides information on the individual's clinical symptoms, personality characteristics, behavioral tendencies, interpersonal functioning, interests, and treatment considerations (substantive scales). The measure also addresses potential threats to its own validity, such as inconsistent responding and over- or under-reporting of dysfunction (validity scales). Some of Beata's scores on the validity scales implicated concerns of defensiveness and underreporting. Beata presented herself in a positive light, denying minor faults and shortcomings which most people would acknowledge, and presented as very well-adjusted. This type of virtuous self-presentation is relatively rare in the general population. There is insufficient data to conclude that Beata intentionally distorted the profile. Given the high level of under-reporting, any absence of dysfunction reported on the substantive scales of the MMPI-2-RF should be viewed with caution. Moreover, scores which are elevated may reflect an underestimate of her true level of dysfunction.

There was no indication of somatic, cognitive, thought, interpersonal, or behavioral dysfunction. However, such dysfunction cannot be ruled out due to the indications of underreporting described earlier. Beata did present with problems in her emotional functioning. Specifically, she presented as stress-reactive and worry prone.

## Personality Assessment Inventory (PAI)

The Personality Assessment Inventory (PAI) is a self-report objective test designed to assess an individual's personality traits and characteristics, as well as various domains of psychopathology.

Beata's responses suggest that she attended to item content, did not respond in a random or careless fashion, and did not attempt to portray herself unfavorably. Moreover, there was no evidence that Beata presented herself in an overly positive manner.

Beata's clinical profile contained no indications of significant psychopathology in the areas that are tapped by the individual clinical scales (e.g., depression, mania, drug problems).

<sup>&</sup>lt;sup>2</sup> The interpretation of personality inventories involves the development of hypotheses about the test subject's characteristics based upon similarities in response patterns. To a large extent, these hypotheses are computer generated, actuarially driven, and based upon probabilities. Thus, any findings should be interpreted cautiously and informed by clinical judgment based upon other available information about the subject. The results should not be read in isolation but are generally accepted within the psychological community as predictive of the characteristics assessed.

## Parenting Stress Index, Fourth Edition (PSI-IV)

The Parenting Stress Index, Fourth Edition (PSI-IV), was designed to measure stress in the parent-child system. It does this by assessing the parent's perceptions of his or her child's characteristics, the personal characteristics of the parent, and the interaction between the parent and the child. Beata's responses regarding her perceptions of Maya's characteristics (i.e., distractibility/hyperactivity, adaptability, reinforces parent, demandingness, mood, and acceptability) fell within normal limits. Moreover, Beata's ratings of her perceptions regarding her own personal characteristics (i.e., competence, isolation, attachment, health, role restriction, and depression) fell within the normal range, including the spouse/parenting partner relationship. There was no evidence of defensive responding.

### PROFESSIONAL COLLATERALS

### TELEPHONE INTERVIEW WITH ASHRAF HANNA, M.D.:

Dr. Ashraf Hanna, upon interview, conveyed that he was one of Maya's treating doctors. He confirmed that he has diagnosed Maya with CRPS. He described Maya's parents as "amazing parents" and said that they were "loving" and "caring." He offered that he has had other patients' parents that were falsely accused of Factious Disorder By Proxy. He said that by the time that it was determined that parents had been falsely accused the children's condition had deteriorated. It was his professional opinion that Maya has CRPS.

### TELEPHONE INTERVIEW WITH ANTHONY KIRKPATRICK, M.D.:

Upon interview, Dr. Anthony Kirkpatrick conveyed that he was one of Maya's treating doctors, has been practicing medicine for 30 years, and is a world renowned expert in treating CRPS. He confirmed that he has diagnosed Maya with CRPS. He expressed no concerns regarding Maya's parents and relayed that they were appropriately treating Maya's illness. He offered that it was his opinion, within a reasonable degree of medical certainty, that Maya will die a painful death if she is not reunited with her parents and provided appropriate, medical care, which she is not presently receiving. He said that he will be testifying to that as well. He said that, unfortunately, many physicians do not understand CRPS in children and, as a result, falsely blame the parents for the child's illness. He also said that the physicians currently responsible for Maya's care have never seen CRPS and do not know how to treat it. Moreover, he said that Dr. Sally Smith has been "totally reckless" and, as a result, an unjust prosecution is going on. He said the doctors have failed to consult with him, and Beata is becoming a "scapegoat" for their own ineptitude.

### TELEPHONE INTERVIEW WITH JENNIFER M. KATZENSTEIN, PH.D.

Dr. Jennifer Katzenstein, upon interview, indicated that she had seen Maya for individual therapy for eight or nine sessions. She expressed concerns regarding social-emotional functioning. She said that Maya had not been having contact with family or friends and was sad about her lack of contact with loved ones. She said that initially Maya was less interactive in therapy but now is responsive. She said that she believed that Maya was physically ill but that there was a

psychological aspect to her illness as well. She said she is working with Maya to develop appropriate coping strategies.

### SUMMARY AND RECOMMENDATIONS

Information gathered as part of this evaluation revealed no evidence that Beata has ever suffered from mental health problems. Individuals who were interviewed as part of this evaluation described Beata as a loving, attentive mother who would do whatever she deemed necessary to make sure Maya received the best medical care, including strongly advocating for Maya. When advocating for Maya it appears that, at times, Beata has been verbally forceful and come across as rude and demanding. This examiner observed some of these behaviors first hand when Beata was expressing significant concern that her daughter was not getting the care she needed that had been prescribed by medical doctors, such as Dr. Kirkpatrick and Dr. Hanna, who specialize in CRPS. This evaluator has been provided no evidence that would support the conclusion that Beata has falsified her daughter's medical condition for any psychological purpose. In the absence of credible medical evidence establishing that Maya does not suffer from a medical condition, factitious disorder by proxy may safely be ruled out. Beata may currently suffer from an adjustment disorder secondary to her daughter's illness and removal from parental custody.

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